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(Official Form 1) (10/05) West Group, Rochester, NY

		NO		l States I Distric	Bankruptcy of the state of the				Voluntary	Petition
Name of Deb	otor (ification)	al, enter Last, First, M		2.50110		Name of Jo	oint Dobtor	(Spouse)(Last, First	Middle	
	, Lynn, N		iddie):			Name of Jo	omi Deoloi	(Spouse)(Last, First	, Middle):	
All Other Na		e Debtor in the la	st 8 years				Names used by ried, maiden, and		or in the last 8 years	
		No./Complete E	IN or other	Tax I.D. No	D.	Last four d	ligits of Soc. Se	ec. No./Compet	e EIN or other Tax I.D. l	No.
(if more than one Street Addres	e, state all): 169					(if more than o	one, state all): ress of Joint De	hton Al-	& Store City and State)	
	rry Ridge	(No. & Street, City Drive	, and State):			Sueet Add	iess of Joint De	EDIOI (No.	& Street, City, and State):	
Plainfiel	ld IL				ZIPCODE 60544					ZIPCODE
	esidence or of the				00311		Residence or o			1
Mailing Addı		(if different from s	street address):			_	ddress of Joint		ifferent from street address):	
SAME		(				i i i i i i i i i i i i i i i i i i i		20001		
					ZIPCODE					ZIPCODE
	Principal Assets	s of Business Deb	tor PLICABLE	<u> </u>		ļ				
(ii uniciciii iioiii	street address abo	ve).								ZIPCODE
Type of Deb	otor (Form of	organization)		ature of l			Chapter or S	Section of Ban	kruptcy Code Under W	/hich
* *	neck one box.)		(Chec	k <b>all</b> appl	icable boxes.)		the Pet	ition is Filed	(Check one box)	
☐ Individual		t Debtors)		Care Busines		Chapte	er 7 🔲 Ch	apter 11	Chapter 15 Petition for	or Recognition
	(includes LLC a		I — ~		state as defined	_	_	_	of a Foreign Main Pr	-
Partnership	`	,	l	U.S.C. § 101 (	(51B)	Chapte	r 9 🔲 Ch	apter 12	Chapter 15 Petition for	-
I = '	btor is not one of	the above	Railro				Chapter 13		of a Foreign Nonmain	1 Proceeding
entities, che	eck this box and p	provide the	Stock				- Chapter 15			
information	requested below	7.)	_	nodity Broker			Natur	e of Debts	(Check one box)	
State t	ype of enti	ty:	Cleari	ng Bank ofit Organizat	tion qualified	Consu     Consu	umer/Non-Bus	iness	Business	
				11 U.S.C. § 5			Chapter 11	Debtors:		
	Fili	ng Fee (Check	one box)			Check one	box:			
Full Filing F	Fee attached					Debtor is	s a small busin	ess as defined in	n 11 U.S.C. § 101(51D).	
_	-	llments (Applicable				Debtor is	s not a small bu	isiness debtor a	s defined in 11 U.S.C. §	101(51D).
	0 11	on for the court's con except in installment		, .		Check if:				
		Applicable to chapt					aggregate non	contingent liqui	idated debts owed to non-	inciders or
	-	urt's consideration.			st attach		are less than \$		duted deots owed to non	misiders of
Statistical/A	dministrative	Information				•			THIS SPACE IS FOR O	COURT USE ONLY
Debtor esti	imates that funds	will be available for	or distribution	to unsecured	creditors.					
<del></del>	imates that, after n to unsecured cr	any exempt propert editors.	y is excluded	d and administ	trative expenses pai	d, there will be	no funds availabl	e for		
Estimated Nu	mber of	1- 50- 100	)- 200-	1,000-	5,001- 10,001-	25,001	50,001- C	OVER		
Creditors		9 99 199	999	5,000	10,000 25,000	50,000	100,000 1	00,000		
	<u> </u>		<u> </u>	Ш		Ш	Ш			
Estimated	\$0 to		100,001 to	\$500,001 to	\$1,000,001 to	\$10,000,001 to	\$50,000,001 to	More than		
Assets	\$50,000	\$100,000	\$500,000	\$1 million	\$10 million	\$50 million	\$100 million	\$100 million		
Estimated	\$0 to		100,001 to	\$500,001 to	\$1,000,001 to	\$10,000,001 to	\$50,000,001 to	More than		
Debts	\$50,000	\$100,000	\$500,000	\$1 million	\$10 million	\$50 million	\$100 million	\$100 million		
			$\boxtimes$	Ш						

(Official Form 1) (10/05) West Group, Rochester, NY FORM B1, Page 2

Voluntary Petition	Name of Debtor(s):	-					
(This page must be completed and filed in every case)	Lynn M. Valerio						
Prior Bankruptcy Case Filed Within Last 8 Years	<u> </u>	il sheet)					
Location Where Filed:	Case Number:	Date Filed:					
Northern District of Ilinois	05-60392	10/15/2005					
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of t	this Debtor (If more than one,	, attach additional sheet)					
Name of Debtor:	Case Number:	Date Filed:					
NONE							
District:	Relationship:	Judge:					
Exhibit A  (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under Chapter 11)  Exhibit A is attached and made a part of this petition	Exhi  (To be completed if del whose debts are primar  I, the attorney for the petitioner named i that I have informed the petitioner that [ chapter 7, 11, 12, or 13 of title 11, Unit explained the relief available under each I further certify that I delivered to the de §342(b) of the Bankruptcy code.  X /s/ Paul M. Bach  Signature of Attorney for Debtor(s)	in the foregoing petition, declare [he or she] may proceed under ed States Code, and have h such chapter.					
Exhibit C  Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health and safety?  Yes, and exhibit C is attached and made a part of this petition.  No	Certification Concerning Debt Counseling by Individual/Joint Debtor(s)						
Venue (Check	e Debtor (Check the Applicable Box any applicable box)	,					
<ul> <li>☑ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.</li> <li>☑ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.</li> <li>☑ Debtor is a debtor in a foreign proceeding and has its principal place of business or principle assets in the United</li> <li>☑ States in this District, or has no principle place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interest of the parties will be served in regard to the relief sought in this District.</li> </ul>							
· ·	sides as a Tenant of Residential Propoplicable boxes.	perty					
☐ Landlord has a judgment against the debtor for possession of debtor	's residence. (If box checked, complete the followi	ng.)					
(Name of landlord that obtained judgment)							
(Address of landlord)	)						
Debtor claims that under applicable nonbankruptcy law, there are c permitted to cure the entire monetary default that gave rise to the ju possession was entered, and							
Debtor has included in this petition the deposit with the court of any period after the filing of the petition.	rent that would become due during the 30-day						

Case 06-12891 Doc 1 Filed 10/1 (Official Form 1) (10/05) West Group, Rochester, NY Docum	
Voluntary Petition	Name of Debtor(s):
(This page must be completed and filed in every case)	Lynn M. Valerio
	Signatures
Signature(s) of Debtor(s) (Individual/Joint)	Signature of a Foreign Representative
I declare under penalty of perjury that the information provided in this petition is true and correct.  [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.  [If no attorney represents me and no bankruptcy petition preparer	I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.  (Check only one box.)
§342(b) of the Bankruptcy Code.  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.	of the documentation required by § 1515 of title 11 are attached.  Pursuant to § 1511 of title 11, United States Code, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign proceeding is attached.
X /s/ Lynn M. Valerio Signature of Debtor  X Signature of Joint Debtor	(Signature of Foreign Representative)  (Printed name of Foreign Representative)
Telephone Number (If not represented by attorney)  10/10/2006  Date	10/10/2006 (Date)
Signature of Attorney  X /s/ Paul M. Bach Signature of Attorney for Debtor(s)  Paul M. Bach 06209530 Printed Name of Attorney for Debtor(s)  Law Firm of Paul M. Bach Firm Name  1955 Shermer Road, Unit 150  Address	Signature of Non-Attorney Bankruptcy Petition Preparer  I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C.§110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C.§110(b), 110(h), and 342(b); and, 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C.§110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor as required in that section. Official Form 19B is attached.
Northbrook IL 60062  847-564-0808 Telephone Number	Printed Name and title, if any, of bankruptcy Petition Preparer  Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principle, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)
10/10/2006  Date  Signature of Debtor (Corporation/Partnership)	Address
I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.	X
The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.	Date Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.
X	Names and Social Security numbers of all other individuals who

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

10/10/2006

prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

 $\label{lem:abs} A\ bankrupt cy\ petition\ preparer's\ failure\ to\ comply\ with\ the\ provisions\ of$ title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; Required by 18 U.S.C. § 156.

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FORM B6D (10/05) West Group, Rochester, NY

n re <u>Lynn M.</u>	Valerio	/ Debtor	Case No	
n re <u>Lynn M.</u>	Valerio	/ Debtor	Case No	_

(if known)

### SCHEDULE D-CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the childs name. See U.S.C. § 112; Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column marked "Codebtor," include the entity on the appropriate schedule of creditors and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedules. Report this total also on the Summary of Schedules.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

(See Instructions Above)	d e b t o r	Nature of Lien, and Description and Market Value of Property Subject to Lien  HHusband WWife JJoint CCommunity	n t i n g e n t	i q u	s p u t e d	Without Deducting Value of Collateral	Portion, if any
Creditor # : 1  Creditor # : 1  Come Eq Servicing Corp  C.O. Box 13716  Sacramento CA 95853-3716		1st mortgage arrearage 6016 Cherry Ridge Drive, Plainfield, Illinois  Value: \$ 260,000.00				\$ 30,000.00	\$ 0.00
Account No:  Creditor # : 2  Rome Eq Servicing Corp  C.O. Box 13716  Sacramento CA 95853-3716		1st mortgage 6016 Cherry Ridge Drive, Plainfield, Illinois  Value: \$ 260,000.00	_			\$ 190,243.00	\$ 0.00
Representing: Home Eq Servicing Corp		Codilis & Associates, Inc. 15W030 N. Frontage Road Suite 100 Burr Ridge IL 60527					
Representing: Home Eq Servicing Corp		Mortgage Electronic Reg System 1595 Spring Hill Road Suite 310 Vienna VA 22182					

(Total of this page) Total \$ (Use only on last page

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FORM B6D (10/05) West Group, Rochester, NY

In re Lynn M.	Valerio	/ Debtor	Case No.
III I C			

(if known)

# SCHEDULE D-CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet)

Creditor's Name and Mailing Address Including ZIP Code and Account Number (See Instructions Above)	0	Date Claim was Incurred, Nature of Lien, and Description and Market Value of Property Subject to Lien HHusband NWife JJoint CCommunity		C o n t i n g e n t	n	D i s p u t e d	Amount of Claim Without Deducting Value of Collateral	Unsecured Portion, if any
Account No:								
Representing: Home Eq Servicing Corp		Fremont Investment & Loan 175 North Riverview Drive Anaheim CA 92808-1225						
		Value:						
Account No:							\$ 66,836.89	\$ 27,079.89
Creditor # : 3 MidAmerica Bank 7955 S. Cass Avenue, Suite 114 Darien IL 60561		2nd mortgage 6016 Cherry Ridge Drive, Plainfield, Illinois						
		Value: \$ 260,000.00						
Account No:	↓							
Representing: MidAmerica Bank		Connolly, Ekl & Williams 115 West 55th Street Suite 400 Clarendon Hills IL 60514  Value:						
Account No:	+	1						
		Value:						
Account No:								
		Value:						
Account No:								
	Ш	Value:						
Sheet No. 1 of 1 continuation sheets a Holding Secured Claims	ttach	ed to Schedule of Creditors	Sub (Total of				66,836.89	
Totaling Octobroa Ciairio		(	Use only on	To	ota	1\$	287,079.89	

FORM B6E (10/05) West Group, Rochester W

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In re Lynn M. Valerio

/ Debtor

Case No. (if known)

### SCHEDULE E-CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H,""W,""J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. If applicable, also report this total on the

Mear	ns Test form.
	Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYP	ES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
	Domestic Support Obligations  Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
	Extensions of credit in an involuntary case  Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
	Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,000* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
	Contributions to employee benefit plans  Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
	Certain farmers and fishermen  Claims of certain farmers and fishermen, up to \$4,925* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
	Deposits by individuals Claims of individuals up to \$2,225* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
$\boxtimes$	Taxes and Certain Other Debts Owed to Governmental Units  Taxes, custom duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
	Commitments to Maintain the Capital of an Insured Depository Institution  Claims based on commitments to FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).
	Claims for Death or Personal Injury While Debtor Was Intoxicated  Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).
	*Amounts are subject to adjustment on April 1, 2007, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

continuation sheets attached

In re_ <i>Lynn M. Valerio</i>	/ Debtor	Case No	
			(if known)

### SCHEDULE E-CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

TYPE OF PRIORITY Taxes and Certain Other Debts Owed to Governmental Units

Creditor's Name, Mailing Address including Zip Code, and Account Number	C o d e b t o r	F V J	and Consideration for Claim  HHusband NWife JJoint	C o n t i n g e n t	l i qui dat	s	of Claim	Amount Entitled to Priority
Account No:  Creditor # : 1  Internal Revenue Service 230 S. Dearborn  Stop 5014CHI  Chicago IL 60604			2002 income taxes				\$ 3,053.57	\$ 3,053.57
Account No:								
Account No:								
Account No:								
Account No:								
Account No:								
Account No:								
Sheet No. 1 of 1 sheets attached the Holding Priority Claims	o Sc	he	edule of Creditors  Subte (Total of t				3,053.57	

Total \$
(Use only on last page of the completed Schedule E. Report total also on Summary of Schedules)

3,053.57

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FORM B6F (10/05) West Group, Rochester, NY

lnre Lynn M. Valerio	/ Debtor	Case No.	
			(:f l.m.n)

### SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the childs name. See 11 U.S.C. 112; Fed.R.Bankr.P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedules. Report this total also on the

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

Creditor's Name and Mailing Address including Zip Code And Account Number (See instructions above.)	C o d e b t o r	H- W- J	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. HusbandWifeJointCommunity	C o n t i n g e n t	U n l i q u i d a t e d	D i s p u t e d	Amount of Claim without deductiong value of colateral
Account No:  Creditor # : 1  Americredit Financial Services  P.O. Box 183593  Arlington Texas 76096-3593							\$ 1,935.28
Account No:  Creditor # : 2 Arrow Financial Services P.O. Box 1206 Oaks PA 19456-1206							\$ 668.33
Account No:  Creditor # : 3  Capital One P.O. Box85520  Richmond VA 23285-5520							\$ 678.69
Account No:  Creditor # : 4  CB USA SEARS  8725 W. Sahara Avenue  The Lakes NV 89163-0001							\$ 1,945.00
2 continuation sheets attached	ļ		•	Subt (Total of t		age)	5,227.30

(Report total also on Summary of Schedules)

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FORM B6F (10/05) West Group, Rochester, NY

In re <i>Lynn M. Va</i>	alerio	/ Debtor	Case No.
			· · · · · · · · · · · · · · · · · · ·

### (if known)

## SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name and Mailing Address including Zip Code And Account Number (See instructions above.)	C o d e b t o r	H  W J、	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.  Justin Husband Wife Joint Community	C o n t i n g e n t	U n l i quidat ed	D i s p u t e d	Amount of Claim without deductiong value of colateral
Account No: 3666			on many				\$ 104.00
Creditor # : 5 Check Recovery Systems 425 Kelso Street Inglewood CA 90301							
Account No:							\$ 392.59
Creditor # : 6 Conneticut General Life Ins Phoenix Claim Office P.O. Box 188039 Chattanooga TN 37422-8039							
Account No:							\$ 127.00
Creditor # : 7 Corwin Medical Care Payment Processing Center P.O. Box 74518 Cincinnati OH 45274-2518							
Account No:							\$ 1,489.00
Creditor # : 8 Cross Country Bank 4700 Exchange Court Boca Raton Florida 33431-4464							
Account No: 8606							\$ 386.75
Creditor # : 9 Edward Hospital C/O Revenue Production Manage P.O. Box 830913 Birmingham AL 35283-0913							
Account No: 1590							\$ 717.00
Creditor # : 10 First Premier Bank 900 Delaware Suite 7 Sioux Falls South Dakota 57104							
Sheet No. 1 of 2 continuation sheets attached to Schedule of Subtotal \$					I \$	3,216.34	
Creditors Holding Unsecured Nonpriority Claims			(Total (Report total also on Summary o	7	Γota	al\$	,

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FORM B6F (10/05) West Group, Rochester, NY

ln re Lynn M. Valerio	/ Debtor	Case No.	
			(if known)

## SCHEDULE F-CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

·	_	1	(Continuation Sheet)	-			<del> </del>
Creditor's Name and Mailing Address including Zip Code And Account Number (See instructions above.)	C o d e b t o r	W J、	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State.  Husband Wife Joint Community	C o n t i n g e n t	n l i qu i d a t	D i s p u t e d	Amount of Claim without deductiong value of colateral
Account No: 3795							\$ 283.60
Creditor # : 11 GE Service Management National Service Contract Cent P.O. Box 7527 Madison Heights MI 48701-7527							
Account No: 0215							\$ 1,975.00
Creditor # : 12 GEMB/ 3 day blinds P.O. Box 276 Dayton OH 45401							
Account No: 2125							\$ 887.00
Creditor # : 13 Household Bank 12447 SW 69th Avenue Dispute Processing Tigard OR 97223-8517							
Account No: 1016							\$ 941.90
Creditor # : 14 HSBC Card Services P.O. Box 17051 Baltimore MD 21297-1051							
Account No: 9868							\$ 131.40
Creditor # : 15 Naperville Radiolgoists SC 6910 S. Madision Street Willowbrook IL 60527							
Account No: 0067							\$ 510.00
Creditor # : 16 Providian P.O. Box 9007 Pleasanton CA 94566-9007							
Sheet No. 2 of 2 continuation sheets attached	ed t	o So	chedule of	Subt	ota	\$	4,728.90
Creditors Holding Unsecured Nonpriority Claims			(To		Γota	1 \$	13,172.54

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### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS **EASTERN DIVISION**

In re Lynn M. Valerio

Case No. Chapter 13

/ Debtor

Attorney for Debtor: Paul M. Bach

### STATEMENT PURSUANT TO RULE 2016(B)

The undersigned, pursuant to Rule 2016(b), Bankruptcy Rules, states that:

- The undersigned is the attorney for the debtor(s) in this case.
- The compensation paid or agreed to be paid by the debtor(s), to the undersigned is:
  - a) For legal services rendered or to be rendered in contemplation of and in 2,500.00 800.00 b) Prior to the filing of this statement, debtor(s) have paid . . . . . . . . . . . . \$ 1,700.00
- of the filing fee in this case has been paid. 3. \$
- The Services rendered or to be rendered include the following:
  - a) Analysis of the financial situation, and rendering advice and assistance to the debtor(s) in determining whether to file a petition under title 11 of the United States Code.
  - b) Preparation and filing of the petition, schedules, statement of financial affairs and other documents required by the
  - c) Representation of the debtor(s) at the meeting of creditors.
- 5. The source of payments made by the debtor(s) to the undersigned was from earnings, wages and compensation for services performed, and

None other

6. The source of payments to be made by the debtor(s) to the undersigned for the unpaid balance remaining, if any, will be from earnings, wages and compensation for services performed, and

None other

7. The undersigned has received no transfer, assignment or pledge of property from debtor(s) except the following for the value stated:

None

The undersigned has not shared or agreed to share with any other entity, other than with members of undersigned's law firm, any compensation paid or to be paid except as follows:

None

Respectfully submitted, Dated: 10/10/2006

X/s/ Paul M. Bach

Attorney for Petitioner: Paul M. Bach

Law Firm of Paul M. Bach 1955 Shermer Road, Unit 150 Northbrook IL 60062

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Americredit Financial Services P.O. Box 183593
Arlington , Texas 76096-3593

Arrow Financial Services P.O. Box 1206 Oaks, PA 19456-1206

Capital One P.O. Box85520 Richmond, VA 23285-5520

CB USA SEARS 8725 W. Sahara Avenue The Lakes, NV 89163-0001

Check Recovery Systems 425 Kelso Street Inglewood, CA 90301

Codilis & Associates, Inc. 15W030 N. Frontage Road Suite 100 Burr Ridge, IL 60527

Conneticut General Life Ins Phoenix Claim Office P.O. Box 188039 Chattanooga, TN 37422-8039

Connolly, Ekl & Williams 115 West 55th Street Suite 400 Clarendon Hills, IL 60514

Corwin Medical Care
Payment Processing Center
P.O. Box 74518
Cincinnati, OH 45274-2518

Cross Country Bank 4700 Exchange Court Boca Raton, Florida 33431-4464

Edward Hospital C/O Revenue Production Manage P.O. Box 830913 Birmingham, AL 35283-0913

First Premier Bank 900 Delaware Suite 7 Sioux Falls, South Dakota 57104

Fremont Investment & Loan 175 North Riverview Drive Anaheim, CA 92808-1225

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National Service Contract Cent P.O. Box 7527 Madison Heights, MI 48701-7527

GEMB/ 3 day blinds P.O. Box 276 Dayton , OH 45401

Home Eq Servicing Corp P.O. Box 13716 Sacramento, CA 95853-3716

Household Bank 12447 SW 69th Avenue Dispute Processing Tigard , OR 97223-8517

HSBC Card Services P.O. Box 17051 Baltimore, MD 21297-1051

Internal Revenue Service 230 S. Dearborn Stop 5014CHI Chicago, IL 60604

MidAmerica Bank 7955 S. Cass Avenue, Suite 114 Darien, IL 60561

Mortgage Electronic Reg System 1595 Spring Hill Road Suite 310 Vienna, VA 22182

Naperville Radiolgoists SC 6910 S. Madision Street Willowbrook, IL 60527

Paul M. Bach 1955 Shermer Road, Unit 150 Northbrook, IL 60062

Providian
P.O. Box 9007
Pleasanton, CA 94566-9007

Lynn M. Valerio 6016 Cherry Ridge Drive Plainfield, IL 60544

### UNITED STATES BANKRUPTCY COURT

# NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

### Chapter 7: Liquidation (\$220 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$274)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$150 filing fee, \$39 administrative fee: Total fee \$189)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
  - 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that

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you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### **Chapter 11:** Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

<u>Chapter 12</u>: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

### Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Printed Name and title, if any, of Bankruptcy Petition Preparer Address:	Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or						
X	partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)						
Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.							
Certific I (We), the debtor(s), affirm that I (we) have received an	cate of the Debtor and read this notice.						
	X						
Printed Name(s) of Debtor(s)	Signature of Debtor	Date					
Case No. (if known)	X						
· · · · · · · · · · · · · · · · · · ·	Signature of Joint Debtor (if any)	Date					